

Run Date: 05/28/2015

# AZ DEPARTMENT OF WATER RESOURCES

## WELL REGISTRY REPORT - WELLS55

Location A 6.0 3.0 10 B D C Well Reg.No 55 - 084823 AMA PHOENIX AMA

Registered Name RYAN & JEANNA MORRIS  
 1812 E. CAVALRY ROAD  
 SURPRISE AZ 85374  
 File Type NEW WELLS (INTENTS OR APPLICATIONS)  
 Application/Issue Date 09/10/1980

Owner OWNER  
 Driller No. 355  
 Driller Name BEEMAN BROTHERS DRILLING, INC.  
 Driller Phone 623-465-9355  
 County MARICOPA  
 Parcel No. 202-20-082B  
 Intended Capacity GPM 10.00  
 Well Type EXEMPT  
 SubBasin EAST SALT RIVER VALLEY  
 Watershed AGUA FRIA RIVER  
 Registered Water Uses DOMESTIC  
 Registered Well Uses WATER PRODUCTION  
 Discharge Method BUCKET - BARREL - STOPWATCH  
 Power ELECTRIC MOTOR 1 - 5 HP

Well Depth 200.00 Case Diam 5.00 Tested Cap 18.00  
 Pump Cap. 18.00 Case Depth 200.00 CRT  
 Draw Down 0.00 Water Level 157.00 Log X  
 Acres Irrig 0.00 Finish PLASTIC OR PVC

Contamination Site: NO - NOT IN ANY REMEDIAL ACTION SITE

Tribe: Not in a tribal zone

Comments 1812 E. Cavalry Road, New River 85087

### Places Of Use

A 6.0 3.0 10 B D C

### Current Action

5/28/2015 860 CHANGE OF WELL OWNERSHIP  
 Action Comment: agt

### Action History

9/23/2009 555 DRILLER & OWNER PACKETS MAILED  
 Action Comment: tb  
 9/17/2009 880 CHANGE IN REMEDIAL ACTION SITE CODE  
 Action Comment: OLD WQARF code: null  
 9/17/2009 550 DRILLING AUTHORITY ISSUED  
 Action Comment: tb  
 9/14/2009 160 NOI RECEIVED FOR DEEPENING A WELL  
 Action Comment: tb  
 9/14/2009 907 45-454(C) LAND NOT WITHIN 100 FT. OF DESIGNATED PROVIDER  
 Action Comment: tb  
 9/14/2009 900 EXEMPTION SUPPLEMENTAL FORM RECEIVED  
 Action Comment: tb  
 9/11/2009 210 COUNTY HEALTH AUTHORITY ENDORSED  
 Action Comment: tb  
 8/26/2009 750 WELL DRILLER REPORT AND WELL LOG RECEIVED  
 Action Comment: tb  
 8/26/1980 755 WELL CONSTRUCTION COMPLETED  
 Action Comment:

Run Date: 05/28/2015

**AZ DEPARTMENT OF WATER RESOURCES**  
**WELL REGISTRY REPORT - WELLS55**

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8/26/1980 805 PUMP INSTALLATION COMPLETION REPORT RECEIVED

Action Comment:

8/26/1980 750 WELL DRILLER REPORT AND WELL LOG RECEIVED

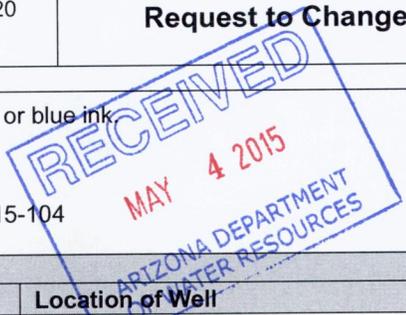
Action Comment:



**Arizona Department of Water Resources**  
 Water Management Division  
 P.O. Box 36020 Phoenix, Arizona 85067-6020  
 (602) 771-8500 • www.azwater.gov

**Request to Change Well Information**

A(6-3)16 BDC



- ◆ Review instructions prior to completing form in black or blue ink.
  - ◆ You must include with your Notice:
    - check or money order for any required fee(s)
  - ◆ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104
- \*\* PLEASE PRINT CLEARLY \*\*

FILE NUMBER  
~~01617159~~

WELL REGISTRATION NUMBER  
55 - 084823

**SECTION 1. REGISTRY INFORMATION**

<b>Well Owner</b>		<b>Location of Well</b>					
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL FRANK GARCIA		WELL LOCATION ADDRESS (IF ANY) 1812 E. Cavalry Rd, New River 85087					
MAILING ADDRESS 1812 E. CAVALRY ROAD		TOWNSHIP (N/S) 6 N	RANGE (E/W) 3 E	SECTION 10	160 ACRE NW ¼	40 ACRE SE ¼	10 ACRE SW ¼
CITY / STATE / ZIP CODE New River, AZ 85087		LATITUDE			LONGITUDE		
		Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
CONTACT PERSON NAME AND TITLE		METHOD OF LATITUDE/LONGITUDE (CHECK ONE) <input type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade					
TELEPHONE NUMBER		FAX		*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (CHECK ONE) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):			
		COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL 202 20 082B			COUNTY WHERE WELL IS LOCATED Maricopa		

**Type of Request (CHECK ONE)**

Change of Well Drilling Contractor (Fill out Section 2)  Change of Well Ownership (Fill out Section 3)  Change of Well Information (location, use, etc.) (Fill out Section 4)

**SECTION 2. REQUEST TO CHANGE WELL DRILLING CONTRACTOR (\$10 Fee Required)**

◆ If drilling or abandoning a well, the Department must receive this request and issue authorization to the new drilling firm prior to the commencement of well drilling or abandonment. **FEE \$120 per Well**

<b>Current Well Drilling Contractor</b>		<b>New Well Drilling Contractor</b>	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	
DWR LICENSE NUMBER		DWR LICENSE NUMBER	ROC LICENSE CATEGORY
TELEPHONE NUMBER	FAX	TELEPHONE NUMBER	FAX

**SECTION 3. STATEMENT OF CHANGE OF WELL OWNERSHIP** **FEE \$30 per Well**

<b>Previous Well Owner</b>		<b>New Well Owner</b>	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL FRANK GARCIA		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL RYAN MORRIS and JEANNA MORRIS	
MAILING ADDRESS 1037 E. Lois Lane		MAILING ADDRESS 1812 E. CAVALRY ROAD	
CITY / STATE / ZIP CODE Phx. AZ. 85020		CITY / STATE / ZIP CODE SURPRISE, AZ 85374	
CONTACT PERSON NAME AND TITLE		CONTACT PERSON NAME AND TITLE	
TELEPHONE NUMBER	FAX	TELEPHONE NUMBER	FAX

**SECTION 4. CHANGE OF WELL INFORMATION (No Fee Required)**

**NOTE:** Applies only to wells that have already been drilled. For proposed wells, an amended Notice of Intent to Drill a Well must be filed.

EXPLAIN

**SECTION 5. OPTIONAL BY PROPERTY OWNER AND WELL OWNER ONLY**

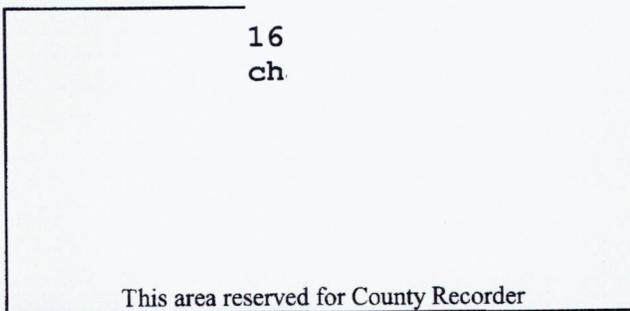
By checking this box, I hereby provide ADWR permission to enter the property for the purpose of taking water level measurements at this well. (See instructions.)

**SECTION 6. WELL OWNER SIGNATURE**

I HEREBY CERTIFY that the above statements are true to the best of my knowledge and belief.

TYPE OR PRINT NAME AND TITLE	SIGNATURE OF WELL OWNER	DATE
	<i>Frank Garcia</i>	4/29/2015

Equity Title Agency, Inc.  
AFTER RECORDING, RETURN TO:  
RYAN MORRIS and JEANNA MORRIS  
1812 E. CAVALRY ROAD  
New River, AZ 85087



ESCROW No. 01617159-016-KF

## Warranty Deed

For the consideration of Ten Dollars, and other valuable considerations,

**FRANK GARCIA, a single man**

do/does hereby convey to

**RYAN MORRIS and JEANNA MORRIS, husband and wife**

the following real property situated in the county of **Maricopa**, State of **ARIZONA**:

See Exhibit A attached hereto and made a part hereof.

SUBJECT TO: Current taxes and other assessments, reservations in patents and all easements, rights of way, encumbrances, liens, covenants, conditions, restrictions, obligations, and liabilities as may appear of record.

And I or we do warrant the title against all persons whomsoever, subject to the matters above set forth.

Dated April 24, 2015

Grantors

  
\_\_\_\_\_  
FRANK GARCIA

\_\_\_\_\_

STATE OF ARIZONA

COUNTY OF **Maricopa**

} ss

This instrument was acknowledged before me this April  
24, 2015 by **FRANK GARCIA**

  
\_\_\_\_\_  
Notary Public  
My commission will expire 7-23-2016

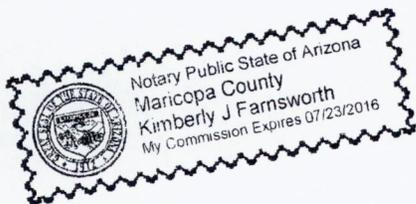


Exhibit A

The Southwest quarter of the Southeast quarter of the Northwest quarter of Section 10, Township 6North, Range 3 East of the Gila and Salt River Base and Meridian, Maricopa County, Arizona.

EXCEPT the East 315 feet; and

EXCEPT all coal and other minerals in said land as set forth in the Patent.

### Acceptance of Joint Tenancy with Right of Survivorship

THAT CERTAIN DEED DATED April 24, 2015, Wherein

**FRANK GARCIA, a single man**

as Grantors, convey to

**RYAN MORRIS and JEANNA MORRIS, husband and wife**

not as tenants in common and not as community property, but as joint tenants with right of survivorship, the property legally described as:

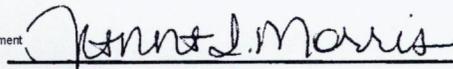
See Exhibit A attached hereto and made a part hereof.

is hereby accepted and approved by the undersigned grantees, therein, it being their intention to acquire said property as joint tenants with right of survivorship, and not as community property, and not as Tenants in Common.

Dated this **April 24, 2015**

  
\_\_\_\_\_  
**RYAN MORRIS**

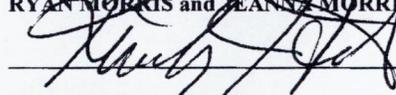
Unofficial Document

  
\_\_\_\_\_  
**JEANNA MORRIS**

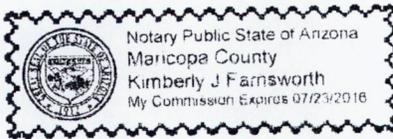
STATE OF ARIZONA  
County of Maricopa

} SS

This instrument was acknowledged before me this April 24, 2015 by  
**RYAN MORRIS and JEANNA MORRIS**

  
\_\_\_\_\_  
My commission will expire 7-23-2016

Notary Public



**Exhibit A**

**The Southwest quarter of the Southeast quarter of the Northwest quarter of Section 10, Township 6North, Range 3 East of the Gila and Salt River Base and Meridian, Maricopa County, Arizona.**

**EXCEPT the East 315 feet; and**

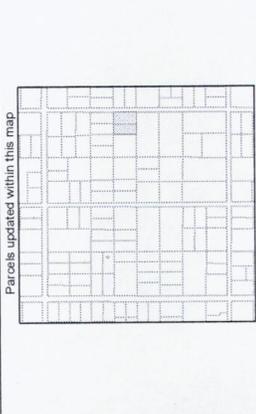
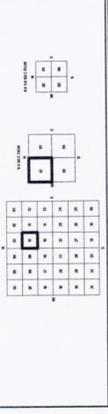
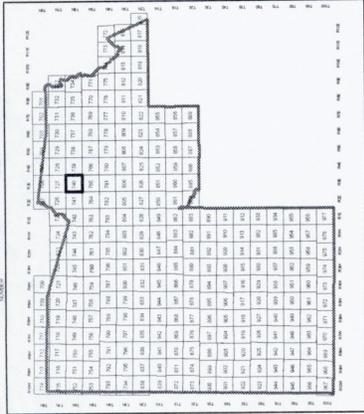
**EXCEPT all coal and other minerals in said land as set forth in the Patent.**

# MARICOPA COUNTY

STATE OF ARIZONA

PT. SECTION 10 T06N R03E

740 - 10 - 02 - 00



Parcels updated within this map



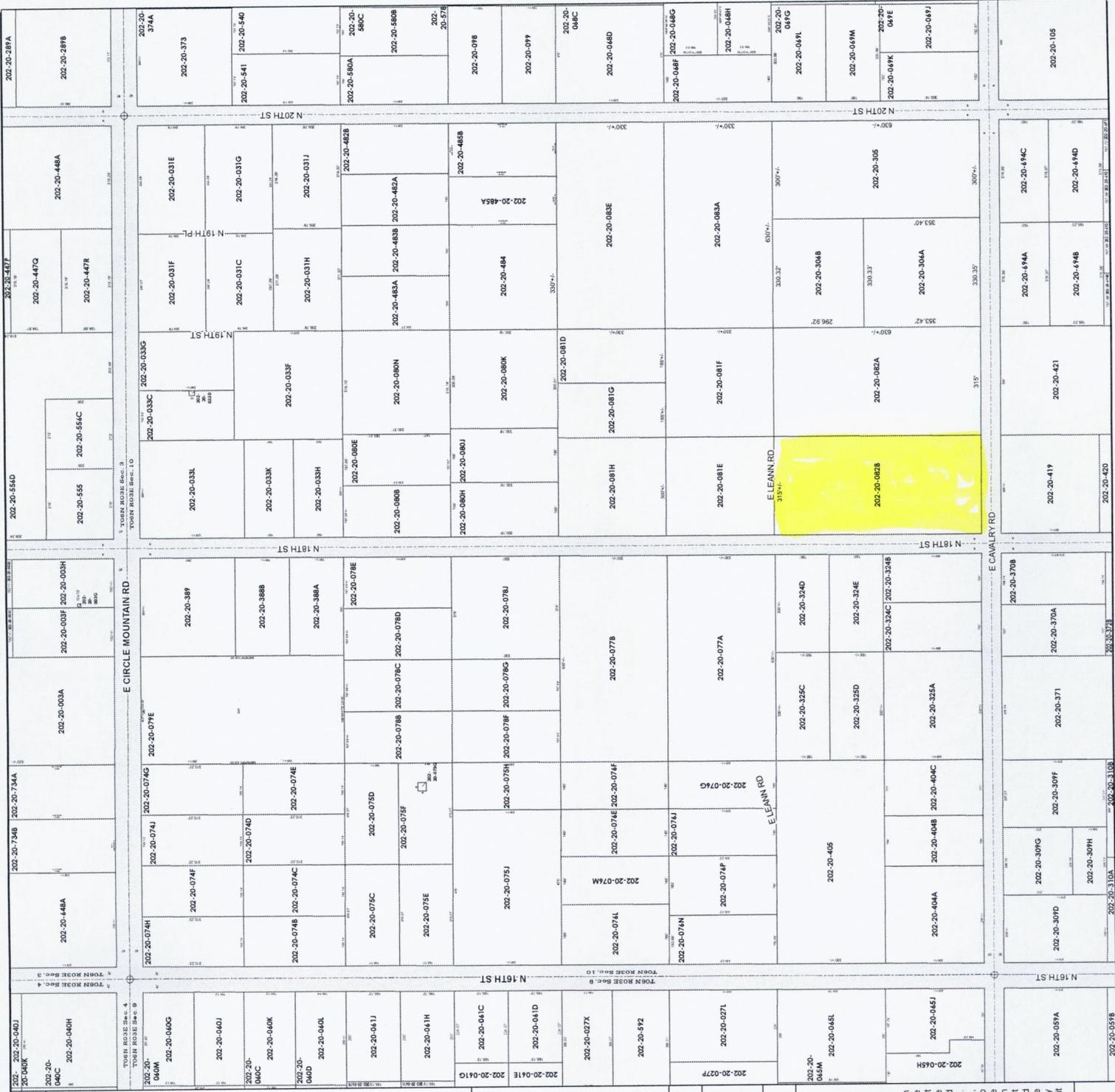
<http://maricopa.maricopa.gov/assessor/>  
Date: 12/17/2014

LEGEND:  Parcels  Subdivisions  Section Corners  Centerlines

Disclaimer - Identification RESEARCH AND VERIFY INFORMATION WITHIN THIS DATASET OR MAP BEFORE RELYING ON IT.

The Assessor's Office has compiled information within this dataset or map that it uses to identify, classify, and value real and personal property. Please contact the Assessor's Office at 602-506-3406 if you believe any information is incomplete, out-of-date, or incorrect so that appropriate corrections can be addressed. Please note that a statutory process is also available to correct errors pursuant to Arizona Revised Statutes 42-1625A.

The Assessor does not guarantee that any information contained within this dataset or map is accurate, complete or current. In many instances, the Assessor has gathered information from independent sources and made it available within this dataset or map, and the original information may have contained errors and omissions. Errors and omissions may have occurred in the process of gathering, interpreting, and reporting the information. Information within this dataset or map is not updated 'real time'. In addition, Users are cautioned that the process used within this dataset or map to illustrate the boundaries of adjacent parcels is not always consistent with the recorded documents for such parcels. The parcel boundaries depicted within this dataset or map are for illustrative purposes only. Purposefully researched and relationship or information provided within this dataset or map is not the equivalent of a title report or a real estate survey. Users should independently research, investigate, and verify all information before relying on it or using it in the preparation of legal documents.



**Arizona Department of Water Resources**

3550 N Central Ave.  
Phoenix AZ 85012

**Customer:**

EQUITY TITLE AGENCY, INC.  
6685 W BEARDSLEY RD., SUITE 205  
GLENDALE, AZ 85308

Receipt #: 15-39145  
Office: MAIN OFFICE  
Receipt Date: 05/05/2015  
Sale Type: IN\_PERSON  
Cashier: WRSYM

Item No.	Index	AOBJ	Description	Ref ID	Qty	Unit Price	Ext Price
81213	15239	4439-TT	Change of Ownership/Change of Well Information/Well Assignment	084823	1	30.00	30.00
<b>RECEIPT TOTAL:</b>							<b>30.00</b>

Payment type: CHECK

Amount Paid: \$30.00

Payment Received Date: 05/05/2015

Notes: FROM TTA.

Check # 508100

Check No. 508100

Check Date: 04/29/2015

DESCRIPTION	CODE	AMOUNT
WELL TRANSFER		\$30.00
		<u>\$30.00</u>
	Check Total	\$30.00

Seller/Buyer: GARCIA/MORRIS  
Property Address: 1812 E. CAVALRY ROAD New River, AZ 85087  
Tax Parcel Id: 202-20-082B  
Memo:



ARIZONA DEPARTMENT OF WATER RESOURCES  
 Information Management Unit  
 P.O. Box 33589, Phoenix, Arizona 85067-3589  
 (602) 771-8527 \* (800) 352-8488  
 www.water.az.gov

RECEIVED  
 NOV 18 2009 009  
 WATER DIVISION

Well Driller Report  
 and  
 Well Log  
 ENTERED  
 DEC - 2 2009

\* This report should be prepared by the driller in detail and filed with the Department within 30 days following completion of the well.  
 \*\* PLEASE PRINT CLEARLY \*\*

**We did not drill (deepen) this well (casing stuck).**

FILE NUMBER  
**A(6-3) 10 BDC**  
 WELL REGISTRATION NUMBER  
**55-084823**  
 PERMIT NUMBER ( IF ISSUED )

Mail To:	<b>SECTION 1. DRILLING AUTHORIZATION</b>	
	<b>Drilling Firm</b>	
	NAME BEEMAN BROTHERS DRILLING, INC.	DWR LICENSE NUMBER 355
	ADDRESS 44806 N. 14TH STREET	TELEPHONE NUMBER 623-465-9355
	CITY/STATE/ZIP NEW RIVER, AZ 85087-7382	FAX

<b>SECTION 2. REGISTRY INFORMATION</b>						
<b>Well Owner</b>			<b>Location of Well</b>			
FULL NAME OF COMPANY, ORGANIZATION OR INDIVIDUAL FRANK GARCIA			WELL LOCATION ADDRESS (IF ANY)			
MAILING ADDRESS 1812 E CAVALRY RD			TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE 1/4
CITY / STATE / ZIP NEW RIVER, AZ 85087			LATITUDE Degrees    Minutes    Seconds    "N	LONGITUDE Degrees    Minutes    Seconds    "W		
CONTACT PERSON NAME AND TITLE			METHOD OF LATITUDE / LONGITUDE (CHECK ONE) <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> *GPS: Survey-Grade			
TELEPHONE NUMBER 623-465-9546		FAX	LAND SURFACE ELEVATION AT WELL Feet Above Sea Level			
WELL NAME (e.g., MW-1, PZ-3, Lot 25 Well, Smith Well, etc.)			METHOD OF ELEVATION (CHECK ONE) <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> *GPS: Survey-Grade			
*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (CHECK ONE) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):						
COUNTY			ASSESSOR'S PARCEL ID NUMBER BOOK    MAP    PARCEL		202    20    082B	

NOT Drilled

<b>SECTION 3. WELL CONSTRUCTION DETAILS</b>		
<b>Drill Method</b>	<b>Method of Well Development</b>	<b>Method of Sealing at Reduction Points</b>
CHECK ONE <input type="checkbox"/> Air Rotary <input type="checkbox"/> Bored or Augered <input type="checkbox"/> Cable Tool <input type="checkbox"/> Dual Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Reverse Circulation <input type="checkbox"/> Driven <input type="checkbox"/> Jetted <input type="checkbox"/> Air Percussion / Odex Tubing <input type="checkbox"/> Other (please specify)	CHECK ONE <input type="checkbox"/> Airlift <input type="checkbox"/> Bail <input type="checkbox"/> Surge Back <input type="checkbox"/> Surge Pump <input type="checkbox"/> Other (please specify)	CHECK ONE <input type="checkbox"/> None <input type="checkbox"/> Packed <input type="checkbox"/> Swedged <input type="checkbox"/> Welded <input type="checkbox"/> Other (please specify)
	<b>Condition of Well</b>	<b>Construction Dates</b>
	CHECK ONE <input type="checkbox"/> Capped <input type="checkbox"/> Pump Installed	DATE WELL CONSTRUCTION STARTED  DATE WELL CONSTRUCTION COMPLETED

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

DRILLING FIRM <b>Beeman Brothers Drilling, Inc.</b>	SIGNATURE OF QUALIFYING PARTY <i>Chuck Beeman</i>	DATE 11/10/09
--	--	------------------



**ARIZONA DEPARTMENT OF WATER RESOURCES  
WATER MANAGEMENT SUPPORT SECTION  
3550 North Central Avenue  
Phoenix, Arizona 85012**

**THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILL OPERATIONS**

**WELL REGISTRATION NO: 55-084823**

**AUTHORIZED DRILLER: BEEMAN BROTHERS DRILLING INC**

**LICENSE NO: 355**

**REMINDER:**

**BEEMAN BROTHERS DRILLING INC IS RESPONSIBLE FOR CONSTRUCTING THE WELL TO CURRENT MINIMUM WELL CONSTRUCTION STANDARDS, i.e., PROPER SURFACE SEAL PER A.A.C. R12-15-811**

**NOTICE OF INTENTION TO DEEPEN AN EXEMPT WELL HAS BEEN FILED WITH THE DEPARTMENT BY:**

**WELL OWNER: FRANK GARCIA 1812 E CAVALRY RD NEW RIVER, AZ 85087**

**The well is to be located in the:**

**SW 1/4 of the SE 1/4 of the NW 1/4 Section 10 Township 6 NORTH Range 3 EAST**

**No. of wells in this project: 1 ASSESSOR PARCEL NO: 202-20-082B**

**THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE 13TH DAY OF SEPTEMBER, 2010**



**WATER MANAGEMENT SUPPORT SECTION**

**THE DRILLER MUST FILE A LOG OF THE WELL  
WITHIN 30 DAYS OF COMPLETION OF DRILLING**

**ARIZONA DEPARTMENT OF WATER RESOURCES**

3550 N. Central Avenue, Phoenix, Arizona 85012

Telephone (602) 771-8500

Fax (602) 771-8691

September 17, 2009



Janice K. Brewer  
Governor

Herbert R. Guenther  
Director

FRANK GARCIA  
1812 E CAVALRY RD  
NEW RIVER, AZ 85087

Registration No. 55-084823  
File No. A(6-3) 10 BDC

Dear Well Owner:

Enclosed is a copy of the Notice of Intention (NOI) to Deepen a well that you recently filed with this Department pursuant to A.R.S. § 45-596. This is to inform you that the Department has approved the NOI and has mailed or otherwise provided a drilling card authorizing the drilling of the well to the well driller identified in the NOI. The driller may not begin drilling until he has received the drilling card, which must be displayed on the drill rig during drilling.

Well drilling activities must be completed within one year after the date the NOI was filed with the Department. If drilling is not completed within one year, you must file a new NOI before proceeding with further drilling. If in the course of drilling the well, it is determined that the well cannot be successfully completed as initially intended (dry hole, cave in, lost tools, etc.), the well must be properly abandoned and a Well Abandonment Completion Report must be filed as required by A.A.C. R12-15-816(F).

If you change drillers, you must notify the Department of the new driller's identity. Please ensure that the new driller is licensed by the Department to drill the type of well you require. A new driller may not begin drilling until he receives a new drilling card from the Department. If you are drilling a new or replacement well and it is necessary to change the location of the proposed well, you may not proceed with drilling until you file an amended NOI with the Department and the Department issues an amended drilling card to the driller. If county approval was required for the original well site plan (this applies to domestic wells on parcels that are five acres or less), you must submit a new well site plan with the new well location to your local county health authority for approval prior to filing the amended NOI with the Department.

A.R.S. § 45-600 requires the registered well owner to complete and file a Pump Installation Completion Report form (DWR form 55-56) within 30 days after the installation of pumping equipment. A form is enclosed for your use. Also enclosed is a well owner's guide that provides useful information and advice concerning your upcoming well construction project. A.R.S. § 45-600 also requires the driller to file a complete and accurate Well Drillers Report and Well Log (DWR form 55-55) within 30 days after completion of drilling. That form was mailed to your driller with the drilling card. You should insist and ensure that all of the required forms are accurately completed and timely filed with the Department.

Please be advised that A.R.S. § 45-593(C) requires the person to whom a well is registered to notify the Department of a change in ownership of the well and/or information pertaining to the physical characteristics of the well in order to keep this well registration file current and accurate. Any change in well information or a request to change well driller must be filed on a Request to Change Well Information form (DWR form 55-71A) that may be downloaded from the ADWR Internet website at <<http://www.water.az.gov/adwr/content/forms/default.htm#NOI>>.

Sincerely,

Toni Bergeman  
NOI Unit  
Water Management Support Section

Enclosures



**Arizona Department of Water Resources**  
 Water Management Support Section  
 P.O. Box 33589 Phoenix, Arizona 85067-3589  
 (602) 771-8500 • (800) 352-8489  
 (602) 771-8691 fax • www.azwater.gov

**Notice of Intent to  
 Drill, Deepen, Replace or Modify a Well**  
 (except a Non-Exempt Well in an Active Management Area)

\$150 or  
 \$100 FEE

- Review instructions prior to completing form in black or blue ink.
- You **must** include with your Notice:
  - Check or money order in the amount of the appropriate filing fee.
  - For a well located within an AMA or INA, the fee is \$150.00.
  - For a well **not** located within an AMA or INA, the fee is \$100.00 if the well will be used solely for domestic purposes (see page 2 and instructions) and will have a pump with a maximum capacity of not more than 35 gallons per minute. Otherwise, the fee is \$150.00.
- Authority for fee: A.R.S. § 45-596.

**\*\* PLEASE PRINT CLEARLY \*\***

AMA/INA	6	SB	6
RECEIVED	DATE	WS	06
9-14-09			
ISSUED	DATE	WQARF	CERCLA
9-17-09			

FILE NUMBER	B16-320100C
WELL REGISTRATION NUMBER	55-084823

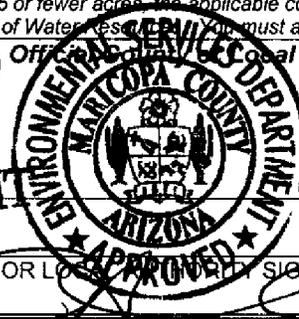
**SECTION 1. COUNTY OR LOCAL HEALTH AUTHORITY APPROVAL (if applicable)**

If water from the proposed well will be used for domestic purposes on a parcel of land of 5 or fewer acres, the applicable county or local health authority must endorse all items in Section 1 within one year before submission to the Department of Water Resources. You must also attach a site plan (pg. 3).

CHECK ONE

- County or Local Health Authority Recommends Approval (pursuant to A.R.S. § 45-596 (G) and (F))
  - Field Inspection Performed
  - Site Plan Review Only
- Insufficient Information to Make a Determination

RECEIVED  
 SEP 14 2009



COUNTY OR LOCAL AUTHORITY NAME AND TITLE

Michael Wesley, Env. NHL Spec.

TELEPHONE NUMBER

602-506-6681

DATE

9/11/09

COUNTY OR LOCAL AUTHORITY SIGNATURE

**SECTION 2. REGISTRY INFORMATION**

Well Type	Proposed Action	Location of Well		
CHECK ONE	CHECK ONE	WELL LOCATION ADDRESS (IF ANY)		COUNTY WHERE WELL IS LOCATED:
<input checked="" type="checkbox"/> EXEMPT (Pump has a maximum capacity of not more than 35 gpm and water is not used for irrigation purposes inside an AMA.) (See instructions.)	<input type="checkbox"/> Drill New Well <input checked="" type="checkbox"/> Deepen <input type="checkbox"/> Replace <input type="checkbox"/> Modify If Deepening, Replacing or Modifying: ORIGINAL WELL REGISTRATION NUMBER	1812 E Cavalry Rd.		Maricopa
<input type="checkbox"/> Non-Exempt (Pump has a maximum capacity of more than 35 gpm and the well is located outside an AMA.) (See instructions.)	55 - 084823	TOWNSHIP (N/S)	RANGE (E/W)	SECTION
DESIGN PUMP CAPACITY	MAXIMUM CAPACITY OF ORIGINAL WELL	6N	3E	10
10 Gallons Per Minute	10 Gallons Per Minute	160 ACRE	40 ACRE	10 ACRE
	DISTANCE & DIRECTION FROM ORIGINAL WELL	BOOK	MAP	PARCEL
	Feet	202	20	082 B
		Place of Water Use (Mandatory information, see instructions.)		
		Is the groundwater basin where the well will be drilled the same as the place where the water will be used?		Yes No
				X
		TOWNSHIP (N/S)	RANGE (E/W)	SECTION
		6N	3E	10
		160 ACRE	40 ACRE	10 ACRE
		NW	SE	SW

**SECTION 3. OWNER INFORMATION**

Well Owner	Landowner (if different from Well Owner)
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL
Frank Garcia	
MAILING ADDRESS	MAILING ADDRESS
1812 E Cavalry Rd.	
CITY / STATE / ZIP CODE	CITY / STATE / ZIP CODE
New River, AZ 85087	
CONTACT PERSON NAME AND TITLE	CONTACT PERSON NAME AND TITLE
Frank Garcia	
TELEPHONE NUMBER	TELEPHONE NUMBER
623-465-9546	
FAX	FAX

**SECTION 4.**

Questions	Yes	No	If Yes:
1. Is the proposed well site within 100 feet of a septic tank system, sewer disposal area, landfill, hazardous materials or petroleum storage area or tank?		x	You must also request a variance (A.A.C. 812-1008).
2. Is there another well name or identification number associated with this well (e.g., Lot 35 Well, Smith Well, etc.)?		x	PLEASE STATE
3. Is the proposed well a NEW well to be located within an Active Management Area? (See instructions.)		x	Unless the well is a replacement well and the total number of operable exempt wells on the land is not increasing, you must also file a supplemental form A.R.S. § 45-454(D).
4. Is the proposed well the second exempt well on this parcel for the same use?		x	If the proposed well is in an Active Management Area, you must also file a supplemental form 55-40A.

**Notice of Intent to Drill, Deepen, Replace or Modify a Well**

WELL REGISTRATION NUMBER  
55 - 064823

SECTION 5. DRILLING AUTHORIZATION RECEIVED		SECTION 6. WATER / SITE INFORMATION	
<b>Drilling Firm</b>		<b>Principal Use of Water</b>	
NAME Beeman Brothers Drilling		CHECK ONE	
DWR LICENSE NUMBER 355	ROC LICENSE CATEGORY C-35	<input type="checkbox"/> Irrigation <input type="checkbox"/> Utility <input type="checkbox"/> Commercial <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Municipal <input type="checkbox"/> Industrial <input type="checkbox"/> Mining <input type="checkbox"/> Stock <input type="checkbox"/> Recharge <input type="checkbox"/> Dewatering <input type="checkbox"/> Other* (please specify):	
TELEPHONE NUMBER 623-465-9355	FAX 623-465-9072	<input type="checkbox"/> Irrigation <input type="checkbox"/> Utility <input type="checkbox"/> Commercial <input type="checkbox"/> Domestic <input type="checkbox"/> Municipal <input type="checkbox"/> Industrial <input type="checkbox"/> Mining <input type="checkbox"/> Stock <input type="checkbox"/> Recharge <input type="checkbox"/> Dewatering <input type="checkbox"/> Other* (please specify):	
MAILING ADDRESS 44806 N 14 <sup>th</sup> St.		DATE CONSTRUCTION IS SCHEDULED TO BEGIN ASAP	
CITY / STATE / ZIP CODE New River, AZ 85087			
RECEIVED SEP 09 2009 WATER MGMT			

D11288

**NOTE:** If this is a Notice of Intent to construct a new well that will be used for the purpose of withdrawing groundwater for transportation to an Active Management Area (AMA) pursuant to A.R.S. § 45-552, 45-553, 45-554 or 45-555(A), the authorization to drill the well issued in association with this Notice shall not be considered the approval to transport groundwater to an AMA. (see instructions.)

SECTION 7. PROPOSED WELL CONSTRUCTION DESIGN (attach separate sheet if needed)																
Borehole			Casing													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE ( T )				PERFORATION TYPE ( T )					GROUTING MATERIAL	
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED		IF OTHER TYPE, DESCRIBE
0	20	12"	0	20	8 5/8"	X*										Cement
20	400	6 3/4"	0	400	6"		x									
			300	380			x									
RECEIVED SEP 14 2009 WATER MGMT																

\* ADWR well construction standards require a surface seal consisting of a minimum of 20 feet of steel casing. Cement grout must be used to fill the annular space between the surface casing and the borehole. (A.A.C. R12-15-811(B))

The Department's issuance of an authorization to drill a well is not a determination of whether water withdrawn from the well is legally surface water or groundwater. The legal nature of the water withdrawn from the well may be the subject of court action in the future as part of a determination of surface water rights in your area. If there are court proceedings that could affect your well, you will be notified and be given the opportunity to participate. If you have questions regarding the legal nature of the water to be withdrawn from your proposed well, please consult with an experienced civil engineer, hydrologist or water rights attorney.

For the purposes of determining appropriate fees outside AMAs or INAs, "domestic purposes" is defined as "uses related to the supply, service and activities of households and private residences and includes the application of water to less than 2 acres of land to produce plants or parts of plants for sale or human consumption, or for use as feed for livestock, range livestock or poultry, as such terms are defined in A.R.S. § 3-1201."

SECTION 8. OPTIONAL BY PROPERTY OWNER AND WELL OWNER ONLY	
<input type="checkbox"/> By checking this box, I hereby provide ADWR permission to enter the property for the purpose of taking water level measurements at this well. (See instructions.)	
SECTION 9. WELL OWNER AND PROPERTY OWNER SIGNATURE	
I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.	
TYPE OR PRINT NAME AND TITLE Frank Garcia	
SIGNATURE OF WELL OWNER <i>Frank Garcia</i>	DATE
SIGNATURE OF LANDOWNER, IF APPLICABLE (SEE INSTRUCTIONS)	DATE

**Notice of Intent to Drill, Deepen, Replace or Modify a Well**

RECEIVED

WELL REGISTRATION NUMBER  
55-084823

CHECK ONE:  FILING MANUALLY  
 FILING ELECTRONICALLY\*

SEP 09 2009

\*DRILLER'S E-MAIL ADDRESS:

Beemanbrothers@hotmail.com

COUNTY OR LOCAL HEALTH AUTHORITY APPROVAL CODE

COUNTY APPROVAL CODE

If applicant is filing this NOI electronically via the ADWR website and County approval is required, please indicate approval by providing a County Approval Code.

630353843

**WELL SITE PLAN**

NAME OF WELL OWNER

Frank Garcia

COUNTY ASSESSOR'S PARCEL ID NUMBER

BOOK

202

MAP

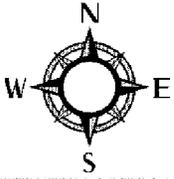
20

PARCEL

082B

- ❖ If this well will be a domestic well on 5 acres or less, please draw the following: (1) the boundaries of your property; (2) the proposed well location; (3) the locations of all septic tank systems and sewer systems on the property or within 100 feet of the well location, even if on neighboring properties; and (4) any permanent structures on the property that may aid in locating the well. If the parcel is vacant land or lacks a septic tank or sewer system, please indicate this.
- ❖ Indicate the distance between the proposed well location and any septic tank system or sewer system.

See Attached



1" = \_\_\_\_\_ ft

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SEP 14 2009  
WATER MGMT

081208

COUNTY OR LOCAL AUTHORITY NAME AND TITLE

Michael Wesley, Env NHK Spec.

COUNTY OR LOCAL AUTHORITY SIGNATURE

*[Signature]*

TELEPHONE NUMBER

602-506-6681

DATE

9/11/09

Official County Seal or Stamp



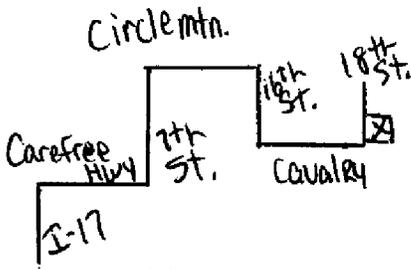
# County Parcels

RECEIVED

SEP 09 2009

MCESD-WWM by \_\_\_\_\_

28216

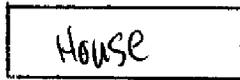


084823

## 315'+/-

### 202-20-082B

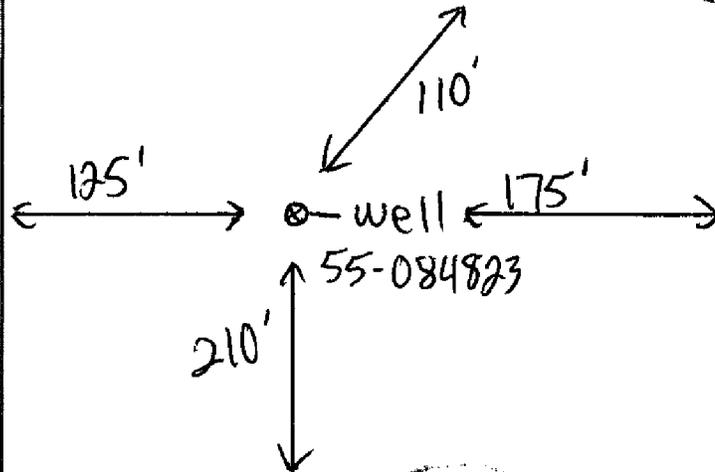
06 N 03 E 10



septic

RECEIVED  
SEP 14 2009

WATER MGMT



202-20-324B

165' 18TH ST  
165'  
300'+/-



RECEIVED



Arizona Department of Water Resources  
Water Management Support Section  
3550 N. Central Ave. Suite 200, Phoenix, Az, 85018  
(602) 771-8500 -- (800) 352-8488  
www.water.az.gov

Certification to the Notice of Intention to Drill  
an Exempt Well within an Active Management  
Area Pursuant to A.R.S. § 45-454(C) & (D)

**Exempt Well Certification of Compliance with A.R.S. § 45-454(C)  
or Request for Exemption Pursuant to A.R.S. § 45-454(D)**

FILE NUMBER
1516-3210 BDC
WELL REGISTRATION NUMBER
55-084823

282120

Effective January 1, 2006, Arizona Revised Statute (A.R.S.) § 45-454(C) prohibits the drilling of an exempt well (a well that has a maximum pump capacity of not more than thirty-five gallons per minute and that is used only for non-irrigation purposes) on land if any part of the land is within 100 feet of the operating water distribution system of a municipal water provider that has an assured water supply designation (designated water provider) within the boundaries of an Active Management Area (AMA) as shown on a digitized service area map provided to the Director by the municipal provider and updated by the municipal provider as specified by the Director. A.R.S. § 45-454(D) provides that the Director shall provide an exemption from this prohibition if one of the following applies.

1. The landowner submitted a written request for service to the municipal provider that operates the distribution system and the municipal provider did not provide written verification to the landowner within thirty calendar days after receipt of the request that water service is available to the landowner after payment of any applicable fee to the municipal provider.
2. The total capital cost and fees for connecting to the operating water distribution system exceed the total capital cost and fees for drilling and fully equipping the exempt well.
3. If the applicant must obtain an easement across other land to connect to the water distribution system of the municipal provider, the applicant sent the owner of the land a request for the easement by certified mail, return receipt requested, and either the applicant did not receive a response to the request within thirty calendar days of mailing the request or the request was denied.
4. The landowner does not qualify for an exemption pursuant to 1, 2 or 3 above and the landowner provides written verification from the municipal provider that the landowner shall not receive or request water service from the municipal provider while the exempt well is operational. The exemption for the well is revoked if the landowner or any subsequent landowner receives water service from the municipal provider. **In determining whether to approve or reject an application to drill a non-exempt well under A.R.S. § 45-599, the director shall not consider any impacts the proposed non-exempt well may have on the exempt well drilled pursuant to this paragraph.**

RECEIVED  
WATER MGMT

In order to obtain authority to drill an exempt well within an AMA, you must fill out the appropriate box below certifying compliance with A.R.S. § 45-454(C) or requesting an exemption pursuant to A.R.S. § 45-454(D).

<b>CERTIFICATION OF COMPLIANCE WITH A.R.S. § 45-454(C)</b>
<input checked="" type="checkbox"/> I certify that no portion of the land on which the proposed exempt well is to be drilled is within one hundred feet of the operating water distribution system of a municipal water provider with an assured water supply designation as shown on the provider's most recent digitized service area map on file with the Arizona Department of Water Resources. I understand that this condition may change prior to the commencement of well drilling and that if, at the time drilling is to commence, the land is within one hundred feet of the operating water distribution system of a municipal water provider with an assured water supply designation as shown on the provider's most recent digitized service area map on file with the Department, the well may not be drilled unless I apply for and am granted an exemption pursuant to A.R.S. § 45-454(D). (If your exempt well falls into this category, skip to and complete "Signature" on the reverse side)

Continued on Reverse

RECEIVED

SEP 09 2004

084823

REQUEST FOR EXEMPTION PURSUANT TO A.R.S. § 45-454(D)

MICESD-WWM by

The land on which the proposed exempt well is to be drilled is within one hundred feet of the operating water distribution system of a municipal water provider with an assured water supply designation as shown on the most recent service area map provided by the municipal provider to the Director of the Arizona Department of Water Resources. Name of municipal provider: \_\_\_\_\_

In accordance with A.R.S. § 45-454(D), I am:

Requesting exemption #    pursuant to A.R.S. § 45-454(D)(1), (2) or (3) as applicable.  
(Check One)

I certify that I meet the requirements for the exemption.

**NOTE:** If you check this box requesting exemption #1, 2, or 3, you must attach to this form evidence of the applicability of the exemption as follows:

Exemption #1: A copy of the letter you sent to the designated water provider requesting water service and a copy of any written response from the provider.

Exemption #2: A cost comparison of the capital cost and fees associated with drilling and equipping the exempt well versus the capital cost and fees associated with connecting to the designated water provider's operating water distribution system. Please list the name of drilling firm that provided the cost estimate for drilling and equipping the well.

Exemption #3: A copy of the letter sent to the landowner from whom an easement must be obtained, a copy of the receipt showing that the letter was received by the landowner and a copy of any written response received from the landowner.

Requesting exemption #4 pursuant to A.R.S. § 45-454(D)(4), with the understanding that in determining whether to approve or reject an application to drill a non-exempt well under A.R.S. § 45-599 (applicable to wells designed to pump greater than 35 GPM and located within an AMA) the director shall not consider any impacts the proposed non-exempt well may have on the exempt well for which this exemption is granted.

**NOTE:** If you checked this box requesting exemption #4, please demonstrate the applicability of the exemption by attaching to this form written verification from the municipal provider that you shall not receive or request water service from the municipal provider while the exempt well is operational.

SIGNATURE

TYPE OR PRINT NAME OF LANDOWNER

Frank Garcia

SIGNATURE OF LANDOWNER

*Frank Garcia*

DATE SIGNED

**NOTE:** A current listing of designated water providers may be found at: [http://www.azwater.gov/dwr/Content/Find\\_by\\_Category/Permits\\_Forms\\_Applications/Files/AssuredWaterSupply/List\\_of\\_Designated\\_Providers\\_2005.pdf](http://www.azwater.gov/dwr/Content/Find_by_Category/Permits_Forms_Applications/Files/AssuredWaterSupply/List_of_Designated_Providers_2005.pdf).

091286

Printed: 9/17/2009 10:37:09 AM

Arizona Department of Water Resources

3550 N Central Ave.  
Phoenix AZ 85012

Customer:

DAVE J TURGEON  
44608 N 14TH STREET  
NEW RIVER, AZ 85087

Receipt #: 10-7906  
Office: BOOKSTORE  
Receipt Date: 9/17/2009  
Sale Type: MAIL  
Cashier: WRMXB

Item No.	Index	AOBJ	Description	Ref ID	Qty	Unit Price	Ext Price
108	15245	4439-06	NOTICE OF INTENT TO DRILL WELL DEEPEN	55-084823 NOI TO DEEPEN	1	150.00	150.00
<b>RECEIPT TOTAL:</b>							<b>150.00</b>

Payment type: CREDIT CARD

Amount Paid: \$150.00

Authorization 0001/389/822578

Notes:

Arizona Department of Water Resources  
3550 North Central Avenue  
Phoenix, Arizona 85012-2105  
602-771-8638 (phone) 602-771-8690 (fax)

### BOOKSTORE INVOICE

Dave J Turgeon

Date of Purchase: 9/17/09

- Cash  
 Check (made payable to AZ Department of Water Resources)  
 Credit Card (Bookstore Staff will obtain Credit Card Information)

Item	Quantity	Price Per Side or Item	Total
Copy, per printed side, up to 11" x 17"		\$ .25	
Certified		\$ 2.75	
Microfiche		\$ .30	
Preprinted report, disk, or map		Varies	
Custom CD		\$5.00 plus \$.25 per additional side	
Custom DVD		\$10.00 plus \$.25 per additional side	
Small Plot Map - up to 24" x 30"		\$ 20.00	
Medium Plot Map - up to 35" x 35"		\$ 45.00	
Large Plot Map - up to 36" x 42"		\$ 50.00	
Shipping		Varies	
Other item <i>NOT to deepen</i>	<i>1</i>	<i>150.00</i>	
<b>Total Due</b>			

Receipt made out to Dave Turgeon  
Address 44608 N14<sup>th</sup> St  
City, State, Zip Code New River Az 85087  
Telephone Number 602-531-3002  
Courier's Name and Telephone Number \_\_\_\_\_

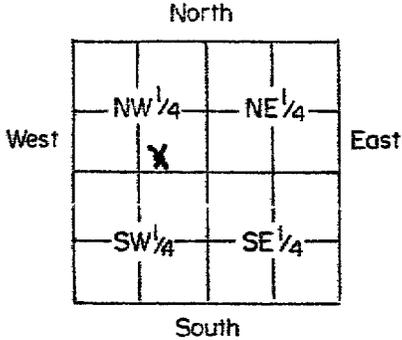
**No refunds without receipt**

EXEMPT WELL  
FILING FEE: \$3.00

DEPARTMENT OF WATER RESOURCES  
NOTICE OF INTENTION TO DRILL OR DEEPEN  
AN EXEMPT WELL

EXEMPT WELL

Section 45-596, Arizona Revised Statutes, provides: A person may not drill or cause to be drilled any well or deepen or replace an existing well without first filing a Notice of Intention to Drill with the Department on a form prescribed and furnished by the Department. The well shall be completed within one year after the date of Notice. An exempt well means a well having a pump with a maximum design capacity of not more than 35 gallons per minute which is used to withdraw groundwater. An exempt well may include the non-commercial irrigation of not more than 1 acre of land.



-Indicate Well Location by X  
(Above diagram represents one  
640 acre section)

WELL/LAND LOCATION:

1. Township 6N  
2. Range 3E  
3. Section 10  
4. W 1/2 SW 1/4 SE 1/4 NW 1/4  
10 acre sub-division  
5. County Maricopa  
6. Owner of Well:  
Charles W. Dumont  
Name  
Box 4191 The River Stage  
Address  
Phx. Az. 85029  
City State Zip  
7. Owner of Land:  
(Same)  
Name  
Address  
City State Zip

DESCRIPTION OF WELL:

8. Diameter 6"  
Depth 200  
9. Type of Casing  
Steel  
10. Principle use of Water  
Domestic

11. Other uses Intended

(If for non-commercial irrigation, state approximate area being cultivated.)

12. Construction will start about:  
Month 9 Year 80

PLACE OF USE:

13. Township 6N  
14. Range 3E  
15. Section 10  
16. Legal description of land water is to be used on:  
W 1/2, SW 1/4, SE 1/4, NW 1/4

17. Design Pump Capacity

10 gpm

18. Action Requested:

Drill   
Deepen   
Replace

19. This notice filed by:

Owner \_\_\_\_\_  
Lessee \_\_\_\_\_  
Driller

Charles E. Campbell  
Name

Box 933  
Address  
Wickenburg, Az. 85358  
City State Zip

20. Drillers Name:

Name \_\_\_\_\_  
Address \_\_\_\_\_

City State Zip  
46892 T-35  
Department License Number

DO NOT WRITE IN THIS SPACE  
OFFICE RECORD  
FILE NO. A(6-3)10 bdc  
FILED 9-2-80 BY J  
INPUT 9-8-80 BY But  
DUPLICATE 9-10-80 BY J  
MAILED  
REGISTRATION NO 155-84823  
AMA  
NON-EXPANSION AREA Phoenix

- Fill out this form in duplicate and mail to P.O. Box 2600, Phoenix, Arizona, 85002, or deliver to 222 N. Central Ave., Suite 550, Phoenix, Arizona, 85004.
  - If the Exempt Well is in fact a replacement (or deepening) well, state the registration number of the existing well.
  - Construction standards for new and replacement wells and the deepening and abandonment of existing wells, shall be in accordance with Department Rules and Regulations.
- I, Charles E. Campbell, state that the construction will be under the direct and personal supervision of the well driller designated on this form and that the designated driller holds a contractors license pursuant to ARS 45-595.

8-28-80  
Date

Charles E. Campbell  
Signature of Person Filing

WELL DRILLER REPORT

This report should be prepared by the driller in all detail and filed with the Department within 30 days following completion of the well.

1. Owner Charles W. Dumont  
Name  
Box 4191 New River Stage, Phoenix, AZ 85029  
Address

2. Lessee or Operator \_\_\_\_\_  
Name  
Address

3. Driller Charles E. Campbell  
Name  
Box 933 Wickenburg Az 85358  
Address

4. Location of well: T6N, R3E, Sec. 10, SW SE NW

5. Permit No. ~~114~~ A(6-3)10 bdc  
(if issued)

DESCRIPTION OF WELL

6. Total depth of hole 200 ft.

7. Type of Casing 5" PUC

8. Diameter and length of casing 5 in. from 0 to 200', \_\_\_\_\_ in from \_\_\_\_\_ to \_\_\_\_\_.

9. Method of sealing at reduction points \_\_\_\_\_

10. Perforated from 185 to 200., from \_\_\_\_\_ to \_\_\_\_\_, from \_\_\_\_\_ to \_\_\_\_\_

11. Size of cuts 8 Number of cuts per foot 8

12. If screen was installed: Length \_\_\_\_\_ ft. Diam \_\_\_\_\_ in. Type \_\_\_\_\_

13. Method of construction Drilled  
drilled, dug, driven, bored, jetted, etc.

14. Date started 8 26 80  
Month day year

15. Date completed 8 26 80  
Month day year

16. Depth to water 80' ft. (If flowing well, so state.)

17. Describe point from which depth measurements were made, and give sea-level elevation if available.  
\_\_\_\_\_

18. If flowing well, state method of flow regulation \_\_\_\_\_

19. REMARKS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DO NOT WRITE IN THIS SPACE  
OFFICE RECORD  
Registration No. 55-84823  
Received \_\_\_\_\_ By \_\_\_\_\_  
Entered OCT 31 1980 By kat  
File No. A(6-3)10 bdc

(Well log to appear on Reverse side)

MICROFILMED



State of Arizona

DEPARTMENT OF WATER RESOURCES

222 North Central Avenue, Suite 850, Phoenix, Arizona 85004



September 10, 1980

Charles W. Dumont  
Box 4191 New River Stage  
Phoenix, AZ 85029

Registration No. 55-84823

Dear Well Owner:

This copy of Notice of Intention to Drill Well is returned to you for your records. Your driller has been mailed separately a Well Drilling Card, Well Drilling Report, and Completion Report.

A.R.S. 45-600 requires the driller to furnish this Department a complete and accurate log of the well within 30 days of completion of drilling, and a Completion Report within 30 days after installation of pumping equipment.

Also enclosed for your future use is a Change of Well Information Form. Per A.R.S. 45-593, the person to whom a well is registered shall notify this Department of a change in ownership of the well and information pertaining to the physical aspects of the well to keep the well registration record current and accurate.

In the event it is necessary to change the location of the proposed well, you should obtain the written permission of the Department of Water Resources before proceeding with the drilling.

Very truly yours,

DEPARTMENT OF WATER RESOURCES

By:

  
Richard A. Gessner, Chief  
Records Section

RAG/ps

MICROFILMED

Think Conservation!

Administration 255-1550, Water Resources and Flood Control Planning 255-1566, Dam Safety 255-1541,  
Flood Warning Office 255-1548, Water Rights Administration 255-1581, Hydrology 255-1586.

Geophila Phillips, Inc.  
 P.O. Box 10000  
 Phoenix, AZ 85004

STATE OF ARIZONA  
 ARIZONA WATER COMMISSION  
 WATER RIGHTS ADMINISTRATION  
 222 N CENTRAL AVE - SUITE 550  
 PHOENIX, ARIZONA 85004

RECEIVED

RECEIPT - EMP

N2 5476

KIND ENTRY	FILE REFERENCE NO
52	11/1
15	11/1

FUND SOURCE	ACCOUNT NO.			INT ACCT	ITEM DESCRIPTION	RATE	\$ AMOUNT
	AGENCY	CHAPTER	DIV.				
					Filing fee for Notice of Intention to Drill on an Existing Well		9.00
					Check #1870		
							WATER PAYMENT GUESTS J CHK NO 3070 32 3.00 55-1 9.00 TAX 0.00 TOTAL 9.00 GEN.CHEK 9.00
					Check #3070		

09-04-79

TOTAL

\$	9.00
----	------

DEPARTMENT OF WATER RESOURCES  
222 North Central Ave., Suite 850  
Phoenix, Arizona 85004



Registration No. 55-84823  
Owner of  
Well Site Charles W. Dumont  
File No. A(6-3)10 bdc

COMPLETION REPORT

1. Completion Report to be filed with the Department within 30 days after installation of pump equipment.
2. The tested pumping capacity of the well in gallons per minute for a non-flowing well should be determined by measuring the discharge of the pump after continuous operation for at least 4 hours and for a flowing well by measuring the natural flow at the land surface.
3. Drawdown of the water level for a non-flowing well should be measured in feet after not less than 4 hours of continuous operation and while still in operation and for a flowing well the shut-in pressure should be measured in feet above the land or in pounds per square inch at the land surface.
4. The static groundwater level should be measured in feet from the land surface immediately prior to the well capacity test.

LOCATION OF THE WELL

T6N, R3E, Sec. 10, SW 1/4 SE 1/4 NW 1/4

Date Well Completed 8-26-80 Depth of Well 200'

1. Well Test:

Test Pumping Capacity 18 GPM Date Well Tested OCT 1980  
(Gal. per min.) (IF CURED WITH A 1/2" GAL. HAND PUMP)

Method of Discharge Measurement 1 1/2 HP SUBMERSIBLE PUMP RUN STEADY AT  
(weir, orifice, current meter, etc.)

Static Groundwater Level 157 ft. Drawdown AFTER 4 HR. - 46.74 ft. (11:07)  
(NO CHANGE IN GPM BETWEEN START & FINISH)

Total Pumping Lift 190' PUMP TO SURF. Drawdown \_\_\_\_\_ lbs.  
(Flowing Well)

2. Equipment Installed:

Kind of Pump SUBMERSIBLE 1 1/2 HP  
(turbine, centrifugal, etc.)

Kind of Power ELECT. H.P. Rating of Motor 1 1/2 HP  
(Elec., Nat. Gas, Etc.)

I HEREBY CERTIFY that the above statements are true to the best of my knowledge and belief.

Charles W. Dumont  
Signature

449 New River Street II  
Address

Phoenix, Ariz 85029  
City State

\_\_\_\_\_, 19\_\_\_\_  
Date

MICROFILMED

INPUT

12-22-81

CHANGE OF WELL INFORMATION

Registration Number 55-84823

I request the following information be changed in well file number A(6-3)10 bdc :

CHANGE OF OWNERSHIP, (USE WILL BE THE SAME, DOMESTIC)

Date

Signature of Well Owner

STATEMENT OF CHANGE OF WELL OWNERSHIP

x John R. Wolfrey  
I, Frank Garcia, state that I am ~~(no longer)~~

(new) owner of the well described below:

TWP 6N RGE 3E, SEC. 10, W 1/2, SW 1/2, SE 1/2, NW 1/2.

Registration No 55-84823

File No. A(6-3) 10 BDC

C.W. DUMONT  
Previous Owner

x John R. Wolfrey  
Frank Garcia  
New Owner

BOX 4497 NEW RIVER STG. II  
Address

Box 4497 New River Stage II  
Address

PHX, AZ, 85029  
City State Zip

Phoenix, Az, 85029  
City State zip

NOTE: ARS 45-594 requires that the Department be notified of change in well ownership and that well owner is required to keep the Department well registration records current and accurate. Well data and ownership changes must be submitted within 30 days after changes take place.

